## CITY OF NEWPORT BUSINESS PERMIT APPLICATION

DATE \_\_\_\_\_

City of Newport Business Control #	
Standard Industrial Classification	(SIC) #
City of Newport Business License	
Total License Fee: \$ & Application Fee \$25.00 = \$	
Total License ree. \$ \alpha App	oncation ree \$25.00 = \$
Business Name:	Location: MORTLE
Newport Physical Location MOBILE	Location: MOBILE Business Phone #
Business Type:	# of Employees on site:
Business Owner:	
Federal ID #:	
Federal ID #:	
Owner's Residence Physical Address & Phon	ne:
Circle One: colo proprietar composition r	control of the contro
	partnership, private ownership, or professions
Oregon Corporation #	xpiration Date:
Pusings Mailing Address:	Phone #:
business Mailing Address.	Prione #:
Name of Rusiness Mar:	D //
TAGING OF DUSTILESS MIGHT	Phone #:
Newport Property Owner: MOBILE	Phone #:
Newport Property Owner: MOBILE Applicants' failure to supply required information, a grounds for denying or suspending the license.	•
Newport Property Owner: MOBILE  Applicants' failure to supply required information, of	r submission of false or misleading information is
Newport Property Owner: MOBILE Applicants' failure to supply required information, a grounds for denying or suspending the license.  Signature of Business Owner or Repr	r submission of false or misleading information is
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Newport Property Owner:MOBILE Applicants' failure to supply required information, of grounds for denying or suspending the license.  Signature of Business Owner or Representation ID #  *******************************	esentative:  ON FOR BUSINESS:
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